

Telehealth Technology Grant Announcement Q&A

On August 4, 2016, the Maryland Health Care Commission (MHCC) released an announcement for grant applications (Grant ID MHCC 17-004) entitled, *Telehealth Technology Project – Round Five*.¹ The MHCC received the questions below from potential applicants regarding this announcement. The MHCC is making available our responses to questions received from potential applicants. This document will be updated as we receive additional questions.

1. **Question:** Could you provide an example of the grant and match fund requirements?

Answer: If the grant is for \$90,000, then the recipient must provide a match of at least \$180,000. No more than \$36,000 (20%) of match may be allocated for services provided by professional IT services or for clinical staff hours that are not otherwise reimbursed. Grantees may bill under the match additional staff hours for services that are not considered IT professional services or clinical services. These services may include, data collection, staff meetings and conference calls with MHCC and preparation of the final report. The match should not be all in-kind services. Equipment purchases and technology service fees have no limitations.

2. **Question:** Are nursing homes or long-term care communities eligible to apply for these grants?

Answer: Yes, if the nursing homes and long-term care facilities meet the qualifications of the grant, they are most welcome to apply. The MHCC encourages a broad group of organizations to submit their use case for these grants.

3. **Question:** The telehealth grant announcement requires the proposal to explain how the meaningful use of electronic health records (EHRs) will be used to support the use case, and how the applicant intends to integrate with the State-Designated health information exchange, the Chesapeake Regional Information System for our Patients (CRISP) and/or an EHR system. How exactly must that be utilized? Is CRISP a statewide platform already being utilized by *ALL* facilities in Maryland or is this one of many forms of EHR in the state and it's up to the different hospitals/facilities to decide which one they use?

Answer: Chesapeake Regional Information System for our Patients, or CRISP, is a regional health information exchange (HIE) serving Maryland the District of Columbia

¹ The announcement can be found here:

<http://mhcc.maryland.gov/mhcc/pages/home/procurement/procurement.aspx>

and areas in Virginia and Delaware. CRISP has been formally designated as Maryland's statewide HIE by the Maryland Health Care Commission. HIEs allow health information to be transmitted electronically across organizations. All of Maryland's hospitals participate in CRISP and any providers may participate in CRISP. Your response to the announcement should include how you will utilize CRISP to support your project. Previous MHCC funded projects have used the data available from CRISP to measure the number of hospital readmissions or emergency department encounters to assess whether telehealth can reduce these encounters. More information on CRISP is available at <https://crisphealth.org/>. More details on how the round one telehealth grants utilized CRISP may be found in the Long Term Care and Hospital Telehealth Project Grants Brief and Final Reports available at:

http://mhcc.maryland.gov/mhcc/pages/hit/hit/documents/Telehealth_Brief_FINAL.pdf

4. **Question:** I am located in Garrett County, in far western Maryland. I noticed that the announcement said that an eastern shore county would have to benefit from a proposed "use case" project. Does that preclude us from applying?

Answer: This particular funding announcement is specifically aimed at testing telehealth use for patients located on the eastern shore. In order to be eligible, your project would need to be aimed at patients living in that area. There will be other telehealth grant opportunities in the future that will be aimed at other regions in the state.

5. **Question:** Could you please explain what you mean by "Use case" in the announcement?

Answer: A use case is a series of related actions between a user(s) and a technology system(s) that enables the user to achieve a particular goal. The project announcement seeks to have grant applicants propose the technology and methodology to be used in order to test the use of a specific type of telehealth, as described in an applicant's proposal, to improve health outcomes, reduce costs, increase efficiencies and/or improve the patient experience for a particular population.

6. **Question:** The announcement mentions that grantees must participate in at least two educational events, meetings, or webinars to showcase and/or demonstrate the work of the project. Does that include the Telehealth Symposium and how many other in-person events will be required?

Answer: Participation in two educational events includes in-person participation in the Telehealth Symposium and may require another in-person event such as a presentation to the MHCC in Baltimore.

7. **Question:** Our clinic already has telehealth equipment that is not currently being utilized. Is our program eligible to apply for the grant to fund the implementation of a telehealth program utilizing equipment that we own?

Answer: Grant funding may be used to fund implementation of the project utilizing equipment that is already owned by the applicant. However, if awarded, equipment purchase prior to an award may not be billed to the MHCC under the award budget.

8. **Question:** We do not have the expertise to implement a telehealth grant on our own. Could you provide me with information to assist me in finding a partner to help implement the telehealth grant?

Answer: The MHCC has contacts with those who have expertise in the field and may assist you in finding a potential partner. Please email Angela Evatt at angela.evatt@maryland.gov for more information.

9. **Question:** What is the difference between mHealth and telehealth?

Answer: For this grant announcement, mHealth includes the practice of health care and public health using mobile devices, such as smart phones and tablets, to increase patient engagement in their own health. Telehealth is the use of real-time audio video conferencing, store-and-forward, and remote monitoring to deliver health care services from a health care provider to a patient located remotely.

10. **Question:** Can out-of-State organizations collaborate with a Maryland organization and submit an application if they focus on the counties and outcomes defined?

Answer: A non-Maryland based company could apply for the grant in partnership with a Maryland-based organization that serves Maryland residents. The primary applicant would need to be the Maryland-based organization.

11. **Question:** Under the terms outlined in the 2:1 financial match, is use of staff costs for clinicians, psychiatrists, or nurses to match the cost above 20 percent **not** permitted? In addition, is it permissible to use a portion of the grant money to aid in paying for those staff?

Answer: If the work of your clinicians, psychiatrists, or nurses are clinical in nature and are otherwise not reimbursable, then those clinical hours may **not** exceed 20 percent of the match budget. Also, 20 percent of the match would also include any in-kind IT services. The budget should **not** include reimbursement for any clinical hours under the MHCC grant dollars. Please note, your budget may include funding for clinicians' time

performing other functions such as developing protocols, training staff to use telehealth tools and protocols, collecting data and participating in planning meetings.

12. **Question:** If two or more organizations are forming a partnership to respond to the grant announcement, which organization should be the primary applicant?

Answer: The primary applicant would need to be a Maryland-based organization and be able to meet the criteria as outlined in sections V, VI, and VII of the grant announcement, which includes a 2:1 financial match and taking lead on all deliverables and milestones, among other things.

13. **Question:** What font and size should be used for the Letter of Intent?

Answer: We do not have a specific font or size for the LOI.

14. **Question:** Is Attachment A (cover page) counted in the 2,500 word count and approximately 4.5 page?

Answer: No, the cover page does not count in the 2,500 total words or approximately 4.5 pages.

15. **Question:** In the LOI, we do not have to provide a budget, so what do you want in the last 2 fields of Attachment A?

Answer: Attachment A requests interested parties to indicate the amount that they are requesting and the matched amount they will provide.

16. **Question:** Are indirect costs included in the proposed budget?

Answer: Please refer to Attachment D in the proposal. Indirect costs are not included in the proposed budget.

17. **Question:** The application requests that we provide an individual resume or detailed bio for each of the personnel who will be assigned if we are awarded the grant. Are you looking for a multi-page highly detailed document, or a one page biography?

Answer: We would prefer a copy of a resume or CV for these individuals.

18. **Question:** Are the documents for the grant to include the experience and qualifications of the proposed staff and the individual resumes to include all of the staff involved in the performance of the telehealth visits at partnering facilities along with the personnel in section IX of the application?

Answer: Resumes for all individuals that will play a key role in the implementation of the project should be included. This includes key personnel at partnering organizations.

19. **Question:** Is general liability insurance sufficient for this grant announcement or does the liability insurance need to specify telehealth services?

Answer: Not all professional liability insurance policies clearly identify if telehealth services are covered; applicants should contact their professional liability insurance carrier to determine if their general liability coverage extends to telehealth services or if supplemental coverage is needed.

20. **Question:** Does professional liability insurance for this grant need to be applied to the partnering provider facilities as well as the practitioners acting as consultants?

Answer: Any practitioner providing telehealth services under this grant would need to be covered by professional liability insurance for the telehealth services being rendered. Applicants should contact their professional liability insurance carrier to determine what additional coverage is needed, if any, for the specific telehealth services being provided under the grant. For more information please see MHCC's Telehealth Professional Liability Insurance flyer [here](#).

21. **Question:** Is there indirect cost associated with this request for applications and, if yes, what is the rate?

Answer: We request that you include all costs, including indirect costs, in your budget proposal that are reasonable to meet the goals of the project. The MHCC may request additional information, justification or adjustments to an applicant's financial proposal budget line items.

22. **Question:** Can you confirm the budget start date can be 11/1/2016 – 4/30/2018?

Answer: This is a reasonable budget start and end date to include in the application. Grant tasks/due dates are tentative and subject to change at the discretion of MHCC after discussion with the prospective awardee.

23. **Question:** Is it acceptable for some goals to have undefined or to be defined baselines if the proposed program is a new and does not have baseline data?

Answer: If a true baseline is not obtainable, we ask applicants to develop a proxy for baseline when possible. If the measure is to look at change over time in a population for which baseline data does not exist, then the goal should be the change you are trying to

measure. For example, 80 percent of participants will report satisfaction with the technology.

24. Question: Should the applicant also submit a Letter of Commitment?

Answer: No, letters of commitment are only required for the partner organizations.

25. Question: Must the applicant submit proof of liability coverage for telehealth as part of the application, or is it sufficient to state within the application that coverage will be obtained prior to beginning telehealth services?

Answer: If the applicant's current liability insurance does not cover telehealth services, the application must include a written commitment, from the applicant, to provide proof of liability insurance coverage of telehealth services within one month of receipt of grant award.

26. Question: Is there a funding limit for staff time?

Answer: All proposed costs should be reasonable given the project scope; the only funding limit for staff time is related to the limit on matching funds. See question 1 above for more details.

27. Question: Should on-going maintenance fees for equipment be captured under the equipment category within the financial proposal or the other category?

Answer: On-going equipment maintenance charges should be captured under equipment and itemized as on-going maintenance fees.

28. Question: Must the applicant submit proof of what the match funding will cover for a provider so that it can be shown the match funding does not exceed 20% for non-reimbursable clinical services?

Answer: The application does not need to include proof or documentation of the 20% match fund requirement concerning non-reimbursable clinical hours. If MHCC has questions regarding the proposed budget, MHCC will reach out to applicants. If the applicant is awarded grant funds detailed documentation supporting the match funds as part of the invoice would be required.

29. Question: What is meant by 'other grant funds cannot be used as matching funds'?

Answer: If the applicant has been awarded grant funds for this project from another source, those funds cannot be counted toward the 2:1 financial match.

30. **Question:** Does the Proposed Milestones Attachment B suffice for the Project Plan timeline or do we need to submit a separate Project Plan timeline document?

Answer: The applicant can submit Attachment B for the project plan timeline as long as all relevant tasks and dates are reflected in Attachment B.